

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Republican Party of Louisiana

ADDRESS (number and street)

530 Lakeland Drive

Suite 215

☐Check if different
than previously
reported. (ACC)

Baton Rouge

LA

70802

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00187450

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2010

through

07

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Dan Kyle

Signature of Treasurer

Electronically Filed by Mr. Dan Kyle

Date

08

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Republican Party of Louisiana

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	110806.29
(b) Cash on Hand at Beginning of Reporting Period	94167.37	
(c) Total Receipts (from Line 19)	25441.21	183746.10
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	119608.58	294552.39
7. Total Disbursements (from Line 31)	18965.21	193909.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	100643.37	100643.37
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	52920.21	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Republican Party of Louisiana

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y Y Y
2 0 1 0

To:

M M
0 7D D
3 1Y Y Y Y
2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2600.00	79903.80
(ii) Unitemized	220.17	30832.23
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2820.17	110736.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10050.00	15050.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	12870.17	125786.03
12. Transfers From Affiliated/Other Party Committees	5000.00	5000.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	307.11	1568.79
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	7263.93	51391.28
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	7263.93	51391.28
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	25441.21	183746.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18177.28	132354.82

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	1930.93	13660.96	
(ii) Non-Federal Share.....	7263.93	51391.28	
(b) Other Federal Operating Expenditures.....	527.41	100853.67	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	9722.27	165905.91	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	9242.94	27503.11	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9242.94	27503.11	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18965.21	193909.02	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11701.28	142517.74	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	12870.17	125786.03
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12870.17	125786.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2458.34	114514.63
37. Offsets to Operating Expenditures (from Line 15, page 3)	307.11	1568.79
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2151.23	112945.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)

Paul F Cambon

Mailing Address 908 Croton Drive

City

Alexandria

State

VA

Zip Code

22308-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Livingston Group

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 2 / 2 0 1 0

Transaction ID: A28FCBF310E404CDDA78

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Dr. Keith Desonier, Jr.

Mailing Address 917 Contraband Ln

City

Lake Charles

State

LA

Zip Code

70605-1434

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 1 0

Transaction ID: A0E7373D6030844D4BE3

Amount of Each Receipt this Period

400.00

Foundation Membership

C.

Full Name (Last, First, Middle Initial)

Mr. Norman V. Kinsey

Mailing Address 401 Edwards St Suite 1805

City

Shreveport

State

LA

Zip Code

71101-5515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kinsey Interests Inc

Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 1 0

Transaction ID: A222747CC46F943D7B9A

Amount of Each Receipt this Period

1000.00

Trust Membership

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)

Mrs. Alice Munger

Mailing Address 2729 Constance St

City

New Orleans

State

LA

Zip Code

70130-5517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 1 / 2 0 1 0

Transaction ID: AC63EF037043B4BDD958

Amount of Each Receipt this Period

100.00

Trust Membership

B.

Full Name (Last, First, Middle Initial)

Mrs. Ruth Ulrich

Mailing Address 406 Forsythe Avenue

City

Monroe

State

LA

Zip Code

71201-4008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Out Of The Box Designs

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.49

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 1 / 2 0 1 0

Transaction ID: A0409B5D3144743DE963

Amount of Each Receipt this Period

100.00

Trust Memebership

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

2600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 44

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)
Bill Cassidy Campaign

Mailing Address 8550 United Plaza Ste 1001

City State Zip Code
Baton Rouge LA 70809

FEC ID number of contributing
federal political committee.

C C00451807

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 1 0

Transaction ID: A87AA1DA9E3044904A0F

Amount of Each Receipt this Period

5000.00

Generic Donation

B.

Full Name (Last, First, Middle Initial)
Fleming for Congress LLC

Mailing Address PO Box 1236

City State Zip Code
Minden LA 71058

FEC ID number of contributing
federal political committee.

C C00445015

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 1 0

Transaction ID: A79062FCE2D744627976

Amount of Each Receipt this Period

50.00

Generic Donation

C.

Full Name (Last, First, Middle Initial)
Next Century Fund

Mailing Address 116 S Royal St

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C C00343947

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 2 / 2 0 1 0

Transaction ID: A86118EDB52444EF78EC

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10050.00

TOTAL This Period (last page this line number only)

10050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)

Republican National Committee

Mailing Address 310 First Street, SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: A8B1269C1FFF9471B81E

Amount of Each Receipt this Period

5000.00

Transfer of Funds

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 44

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address P.O. Box 1210

City

Charlotte

State

NC

Zip Code

28201-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1519.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	0

Transaction ID: AE2675FF95DAD42EC822

Amount of Each Receipt this Period

307.11

Refund of Expenses Paid

SUBTOTAL of Receipts This Page (optional)

307.11

TOTAL This Period (last page this line number only)

307.11

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address P.O. Box 1210

City Charlotte State NC Zip Code 28201-1210

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BCC63A01D67B7403DAC0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

420.23

B.

Full Name (Last, First, Middle Initial)
LA Department of Revenue

Mailing Address 617 N 3rd St.

City Baton Rouge State LA Zip Code 70802-5428

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B79DCF6C9EBB94EE4B6E

Date of Disbursement

/ /

Amount of Each Disbursement this Period

107.18

SUBTOTAL of Disbursements This Page (optional)

527.41

TOTAL This Period (last page this line number only)

527.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Karen Connolly	Transaction ID: BB0929C4A51CA46C6B01 Date of Disbursement																				
Mailing Address 6880 Christopher Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	1	0												
City Greenwell Springs State LA Zip Code 70739-4253	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1183.28</td> </tr> </table>	1183.28																			
1183.28																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Karen Connolly	Transaction ID: BA7240EF86DAA467FB46 Date of Disbursement																				
Mailing Address 6880 Christopher Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	1	0												
City Greenwell Springs State LA Zip Code 70739-4253	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1183.28</td> </tr> </table>	1183.28																			
1183.28																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Crayon Campus	Transaction ID: B76FC5296EF58414CA4B Date of Disbursement																				
Mailing Address 9715 Lawndale Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	1		2	0	1	0												
City Baton Rouge State LA Zip Code 70818	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Benefits	<table border="1"> <tr> <td colspan="10">275.00</td> </tr> </table>	275.00																			
275.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">2641.56</td> </tr> </table>	2641.56																			
2641.56																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Crayon Campus	Transaction ID: BF9965DB841EC4A2393F Date of Disbursement
Mailing Address 9715 Lawndale Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 1 0</div> </div>
City State Zip Code Baton Rouge LA 70818	Amount of Each Disbursement this Period <div>275.00</div>
Purpose of Disbursement Employee Benefit	<div>Category/Type</div>
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Iberia Bank Visa	Transaction ID: B0BEEE8BBEF094B79A46 Date of Disbursement
Mailing Address PO Box 30495	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 1 0</div> </div>
City State Zip Code Tampa FL 33630-3495	Amount of Each Disbursement this Period <div>112.61</div>
Purpose of Disbursement Finance Chgs	<div>Category/Type</div>
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Iberia Bank Visa	Transaction ID: BE9CE6D1EDCA84784ACB Date of Disbursement
Mailing Address PO Box 30495	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 0</div> </div>
City State Zip Code Tampa FL 33630-3495	Amount of Each Disbursement this Period <div>84.45</div>
Purpose of Disbursement Finance Chgs	<div>Category/Type</div>
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

472.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

<p>A. Full Name (Last, First, Middle Initial) Iberia Bank</p> <p>Mailing Address 3700 Essen Ln</p> <p>City Baton Rouge State LA Zip Code 70809-2134</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7F8C666DFEA14B79B0F</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="123.92"/></p>
<p>B. Full Name (Last, First, Middle Initial) Liquid Ventures</p> <p>Mailing Address 12232 Industriplex Blvd Ste 1</p> <p>City Baton Rouge State LA Zip Code 70809-7105</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD22601E5FE8541EA814</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="522.40"/></p>
<p>C. Full Name (Last, First, Middle Initial) Mail Chimp</p> <p>Mailing Address 512 Means St Ste 404</p> <p>City Atlanta State GA Zip Code 30318-5788</p> <p>Purpose of Disbursement Email Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD49096EFBAC243FD8CE</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="483.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

1129.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)
Secretary Of State

Mailing Address PO Box 94125

City State Zip Code
Baton Rouge LA 70804

Purpose of Disbursement
Voter List

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B496B4182002E4DDFACA

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

9242.94

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Acme Oyster HouseNature of Debt (Purpose):
Meals

Mailing Address 3000 Veterans Blvd

City State ZIP Code
Metairie LA 70002

Outstanding Balance Beginning This Period

161.52

Transaction ID: D08FAE847AFE74807855

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

161.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Albertson'sNature of Debt (Purpose):
supplies- snacks

Mailing Address 9990 Bluebonnet Rd

City State ZIP Code
Baton Rouge LA 70820

Outstanding Balance Beginning This Period

46.95

Transaction ID: D36772175EE414B3DB35

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

46.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Aristotle InternationalNature of Debt (Purpose):
Software Hosting

Mailing Address 205 Pennsylvania Ave SE

City State ZIP Code
Washington DC 20003

Outstanding Balance Beginning This Period

7200.00

Transaction ID: D0331390CF1564350925

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7200.00

1) SUBTOTALS This Period This Page (optional).....

7408.47

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
At&tNature of Debt (Purpose):
Cellphone

Mailing Address PO Box 945800

City State ZIP Code
Maitland FL 32794-5800

Outstanding Balance Beginning This Period

184.74

Transaction ID: D95D955D698B44B66A56

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

184.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Best BuyNature of Debt (Purpose):
Supplies

Mailing Address Mall of Louisiana

City State ZIP Code
Baton Rouge LA 70809

Outstanding Balance Beginning This Period

217.99

Transaction ID: D798E94D7001F42FB926

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

217.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Budget Rent A CarNature of Debt (Purpose):
Travel

Mailing Address

City State ZIP Code
Hanover MD

Outstanding Balance Beginning This Period

191.78

Transaction ID: D68F7E43FADD6485A936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

191.78

1) SUBTOTALS This Period This Page (optional).....

594.51

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cafe MarignyNature of Debt (Purpose):
Meals

Mailing Address 640 Frenchmen St

City State ZIP Code
New Orleans LA 70116

Outstanding Balance Beginning This Period

82.24

Transaction ID: DEBFB2ECFAFE94AF791F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

82.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capitol GroceryNature of Debt (Purpose):
Meals

Mailing Address 701 Spanish Town Road

City State ZIP Code
Baton Rouge LA

Outstanding Balance Beginning This Period

32.84

Transaction ID: D8B97455FCE0E4ADFA70

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Chevron Gas StationNature of Debt (Purpose):
auto gasoline

Mailing Address 510 Saint Ferdinand St

City State ZIP Code
Baton Rouge LA 70802

Outstanding Balance Beginning This Period

122.00

Transaction ID: D9295EFAE5DC04E0B892

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

122.00

1) SUBTOTALS This Period This Page (optional).....

237.08

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Circle KNature of Debt (Purpose):
auto gasoline

Mailing Address 9110 Airline Hwy

City State ZIP Code
Baton Rouge LA 70809

Outstanding Balance Beginning This Period

40.62

Transaction ID: D13033851ECE245B5BB5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

40.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Continental AirlinesNature of Debt (Purpose):
Travel

Mailing Address 900 Grand Plaza Drive

City State ZIP Code
Houston TX 77067

Outstanding Balance Beginning This Period

38.00

Transaction ID: D275D506D213B4F459AF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courtyard By Marriot NavyyardNature of Debt (Purpose):
Travel

Mailing Address 140 L Street SE

City State ZIP Code
Washington DC 20003-3335

Outstanding Balance Beginning This Period

303.27

Transaction ID: D294298D038FC482DA79

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

303.27

1) SUBTOTALS This Period This Page (optional).....

381.89

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Crescent City BrewhouseNature of Debt (Purpose):
Meals

Mailing Address 527 Decatur Street

City State ZIP Code
New Orleans LA 70130

Outstanding Balance Beginning This Period

88.00

Transaction ID: D2201137A48C647659C6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

88.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Crown TrophyNature of Debt (Purpose):
supplies- nameplates

Mailing Address 4215 S Sherwood Forest Blvd

City State ZIP Code
Baton Rouge LA 70816-4323

Outstanding Balance Beginning This Period

26.16

Transaction ID: D0F32C58585484FCE95D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26.16

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Domino's PizzaNature of Debt (Purpose):
Meals

Mailing Address 7865 Jefferson Hwy

City State ZIP Code
Baton Rouge LA 70809

Outstanding Balance Beginning This Period

188.51

Transaction ID: DF6AF01634F7549559D9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

188.51

1) **SUBTOTALS** This Period This Page (optional).....

302.67

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Drago's RestaurantNature of Debt (Purpose):
meals

Mailing Address 3232 N Arnoult Rd

City State ZIP Code
Metairie LA 70002

Outstanding Balance Beginning This Period

153.85

Transaction ID: D8D19D3B52A1C447581F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
East BuffetNature of Debt (Purpose):
Meals

Mailing Address 2750 Severn Avenue

City State ZIP Code
Metairie LA 70002

Outstanding Balance Beginning This Period

141.74

Transaction ID: D1DE2A07F255A4BFB8E2

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

141.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ExxonNature of Debt (Purpose):
auto gasoline

Mailing Address 4527 Perkins Rd

City State ZIP Code
Baton Rouge LA 70808-3036

Outstanding Balance Beginning This Period

331.94

Transaction ID: D30732137DAFC41FC8AB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

331.94

1) SUBTOTALS This Period This Page (optional).....

627.53

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fury'sNature of Debt (Purpose):
Meals

Mailing Address 724 Martin Behrmann

City State ZIP Code
Metairie LA 70005

Outstanding Balance Beginning This Period

90.39

Transaction ID: D68AA863E9A3A4290BF1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

90.39

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Halekulani HotelNature of Debt (Purpose):
Travel

Mailing Address 2199 Kalia Road

City State ZIP Code
Honolulu HI 96815

Outstanding Balance Beginning This Period

254.66

Transaction ID: D9252A2905D4D4B2C902

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

254.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hilton HotelsNature of Debt (Purpose):
Auto Parking

Mailing Address 7930 Jones Branch Dr Ste 1100

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

24.00

Transaction ID: D6BF10546BA394C58BBA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.00

1) SUBTOTALS This Period This Page (optional).....

369.05

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hilton HotelsNature of Debt (Purpose):
Auto Parking

Mailing Address 7930 Jones Branch Dr Ste 1100

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

104.00

Transaction ID: DAE50EAA1917A482FA98

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

104.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hilton HotelsNature of Debt (Purpose):
Generic Travel

Mailing Address 7930 Jones Branch Dr Ste 1100

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

1300.82

Transaction ID: DC816E81D2E9C41B59AC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1300.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hilton HotelsNature of Debt (Purpose):
Meals

Mailing Address 7930 Jones Branch Dr Ste 1100

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

26.29

Transaction ID: DD6BCE701C1EF4B3D972

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26.29

1) SUBTOTALS This Period This Page (optional).....

1431.11

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hilton HotelsNature of Debt (Purpose):
Travel

Mailing Address 7930 Jones Branch Dr Ste 1100

City State ZIP Code
McLean VA 22102

Outstanding Balance Beginning This Period

73.75

Transaction ID: D8B5D528FB7BE43FEABB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

73.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hudson NewsNature of Debt (Purpose):
Travel

Mailing Address New Orleans Airport

City State ZIP Code
Kenner LA 70065

Outstanding Balance Beginning This Period

6.63

Transaction ID: DB9148B76A2E642AA843

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6.63

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Iberia Bank VisaNature of Debt (Purpose):
Jan- Jun finance fees

Mailing Address PO Box 30495

City State ZIP Code
Tampa FL 33630-3495

Outstanding Balance Beginning This Period

430.73

Transaction ID: DA18CC9AE747E4AA5B6E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

430.73

1) **SUBTOTALS** This Period This Page (optional).....

511.11

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Italian PieNature of Debt (Purpose):
Meals

Mailing Address 11748 Coursey Blvd

City State ZIP Code
Baton Rouge LA 70816-4401

Outstanding Balance Beginning This Period

147.91

Transaction ID: D8E5D92C0B0D24FA2B79

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

147.91

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jamestown AssociatesNature of Debt (Purpose):
FEA Volunteer Mass Mail

Mailing Address 5 Mapleton Rd, Suite 300

City State ZIP Code
Princeton NJ 08540

Outstanding Balance Beginning This Period

3800.00

Transaction ID: D639C2E9CBC5841199BF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
La Political ReviewNature of Debt (Purpose):
Subscription

Mailing Address PO Box 6

City State ZIP Code
Baton Rouge LA 70821

Outstanding Balance Beginning This Period

145.00

Transaction ID: D28826217F9EF4DB1ADA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

145.00

1) SUBTOTALS This Period This Page (optional).....

4092.91

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Marriott HotelNature of Debt (Purpose):
Travel

Mailing Address 10400 Fernwood Rd

City State ZIP Code
Bethesda MD 20817

Outstanding Balance Beginning This Period

111.87

Transaction ID: D5BBD8CE00EB348E1902

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

111.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mulate's RestaurantNature of Debt (Purpose):
Meals & Entertainment

Mailing Address 201 Julia St

City State ZIP Code
New Orleans LA 70130

Outstanding Balance Beginning This Period

113.25

Transaction ID: DBC7CFB1D57B74374BC7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

113.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mystic Krewe of LANature of Debt (Purpose):
Casting fees

Mailing Address PO Box 65122

City State ZIP Code
Baton Rouge LA 70896

Outstanding Balance Beginning This Period

715.00

Transaction ID: DA740B2E7EF954F809BB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

715.00

1) SUBTOTALS This Period This Page (optional).....

940.12

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 / 44

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
New South Parking Systems

Nature of Debt (Purpose):
Travel

Mailing Address Louis Armstrong Airport

City State ZIP Code
Kenner LA 70065

Outstanding Balance Beginning This Period

54.00

Transaction ID: DBD6CE29CCE1247CDBA5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NewsMax Magazine

Nature of Debt (Purpose):
Subscription

Mailing Address PO Box 20989

City State ZIP Code
West Palm Beach FL 33416

Outstanding Balance Beginning This Period

54.00

Transaction ID: DEE5CA476E5DC46E1BAA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Office Depot

Nature of Debt (Purpose):
Generic Postage

Mailing Address Veteran's Blvd

City State ZIP Code
Metairie LA 70005

Outstanding Balance Beginning This Period

228.80

Transaction ID: D5D6C8BF97D0140849B9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

228.80

1) **SUBTOTALS** This Period This Page (optional).....

336.80

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 28 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Olsen & ShulovNature of Debt (Purpose):
Generic Direct Mail Print-
ing

Mailing Address 1609 Shoal Creek Blvd #203

City State ZIP Code
Austin TX 78701-1022

Outstanding Balance Beginning This Period

13614.54

Transaction ID: DFFA2A98A133441C79D0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13614.54

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Olsen & ShulovNature of Debt (Purpose):
Generic Direct Mail Posta-
ge

Mailing Address 1609 Shoal Creek Blvd #203

City State ZIP Code
Austin TX 78701-1022

Outstanding Balance Beginning This Period

3883.42

Transaction ID: D151679745D854CD0B88

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3883.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Papa John's PizzaNature of Debt (Purpose):
Meals & Entertainment

Mailing Address 1580 Nicholson Dr

City State ZIP Code
Baton Rouge LA 70802

Outstanding Balance Beginning This Period

186.67

Transaction ID: DE466ECFCC25045CC92A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

186.67

1) SUBTOTALS This Period This Page (optional).....

17684.63

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
PaypalNature of Debt (Purpose):
bank fees

Mailing Address

City State ZIP Code
CA

Outstanding Balance Beginning This Period

1.95

Transaction ID: D64EF5167332D471CBA1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.95

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Premiere MarketingNature of Debt (Purpose):
Supplies-books

Mailing Address 109 International Dr

City State ZIP Code
Franklin TN 37067

Outstanding Balance Beginning This Period

50.00

Transaction ID: DCA5F8BFAEC424DBB90D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Premium ParkingNature of Debt (Purpose):
Auto parking

Mailing Address 900 St Charles Ave

City State ZIP Code
New Orleans LA 70130

Outstanding Balance Beginning This Period

13.00

Transaction ID: D6E000AC5F42445ED99C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13.00

1) SUBTOTALS This Period This Page (optional).....

64.95

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 30 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
R&O's PizzaNature of Debt (Purpose):
Meals

Mailing Address 216 Metairie Hammond Hwy

City State ZIP Code
Metairie LA 70005

Outstanding Balance Beginning This Period

352.93

Transaction ID: DE95158326F1A4359AB9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

352.93

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RacetracNature of Debt (Purpose):
auto gasoline

Mailing Address 3425 S Sherwood Forest Blvd

City State ZIP Code
Baton Rouge LA 70816

Outstanding Balance Beginning This Period

39.79

Transaction ID: D59F893BCB86748DC83D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

39.79

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Republican National CommitteeNature of Debt (Purpose):
fees

Mailing Address 310 First Street, SE

City State ZIP Code
Washington DC 20003

Outstanding Balance Beginning This Period

200.00

Transaction ID: D9832197165124FD598E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) SUBTOTALS This Period This Page (optional).....

592.72

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 31 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ruth's Chris SteakhouseNature of Debt (Purpose):
Meals & Entertainment

Mailing Address 4836 Constitution Ave

City State ZIP Code
Baton Rouge LA 70808

Outstanding Balance Beginning This Period

360.79

Transaction ID: D030E05F0BF6E42BDAB4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

360.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SemolinaNature of Debt (Purpose):
meals

Mailing Address 4506 Jamestown Ave

City State ZIP Code
Baton Rouge LA

Outstanding Balance Beginning This Period

70.87

Transaction ID: DA4E6B722076C494EA69

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

70.87

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Shell Oil CorporationNature of Debt (Purpose):
Auto Gasolione

Mailing Address One Shell Square

City State ZIP Code
Houston TX 77002

Outstanding Balance Beginning This Period

217.07

Transaction ID: D9A9742BF0CBB47C5B70

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

217.07

1) SUBTOTALS This Period This Page (optional).....

648.73

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 32 / 44

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Shoney's Metairie

Nature of Debt (Purpose):
meals

Mailing Address 759 Veteran's Memorial Blvd

City State ZIP Code
Metairie LA 70005

Outstanding Balance Beginning This Period

44.39

Transaction ID: DFBACE0FE2BAB47EC861

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44.39

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Sylvester Management

Nature of Debt (Purpose):
Training

Mailing Address PO Box 986

City State ZIP Code
Irmo SC 29063

Outstanding Balance Beginning This Period

1100.00

Transaction ID: D90905C0E35064F03983

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Texaco

Nature of Debt (Purpose):
auto gasoline

Mailing Address Jefferson Hwy

City State ZIP Code
Baton Rouge LA 70809

Outstanding Balance Beginning This Period

31.18

Transaction ID: DF162E44ED1B64CD0B0C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31.18

1) SUBTOTALS This Period This Page (optional).....

1175.57

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 33 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Crescent SpoonNature of Debt (Purpose):
meals

Mailing Address 3120 Cleary Ave

City State ZIP Code
Metairie LA 70002

Outstanding Balance Beginning This Period

26.73

Transaction ID: DF38238E76A73408195A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Ups StoreNature of Debt (Purpose):
Generic Postage

Mailing Address 2851 Johnston St

City State ZIP Code
Lafayette LA 70503

Outstanding Balance Beginning This Period

63.78

Transaction ID: DE500892612A8488981B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

63.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TJ RibsNature of Debt (Purpose):
Meals & Entertainment

Mailing Address Acadian Thruway

City State ZIP Code
Baton Rouge LA 70808

Outstanding Balance Beginning This Period

105.84

Transaction ID: D04D76C27753B46B98BF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

105.84

1) **SUBTOTALS** This Period This Page (optional).....

196.35

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
US Post OfficeNature of Debt (Purpose):
Postage

Mailing Address Bluebonnet Blvd

City State ZIP Code
Baton Rouge LA 70809

Outstanding Balance Beginning This Period

112.00

Transaction ID: D612CC811E0BD4422B74

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

112.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Villere's FloristNature of Debt (Purpose):
Benevolence

Mailing Address 750 Martin Behrman

City State ZIP Code
Metairie LA 70005

Outstanding Balance Beginning This Period

134.19

Transaction ID: D2A478061B5754085968

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

134.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Walk On's BistreauxNature of Debt (Purpose):
Meals & Entertainment

Mailing Address 3838 Burbank

City State ZIP Code
Baton Rouge LA 70808

Outstanding Balance Beginning This Period

83.00

Transaction ID: D86530EAD1A454CAB92A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

83.00

1) **SUBTOTALS** This Period This Page (optional).....

329.19

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 35 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wendy's HamburgersNature of Debt (Purpose):
meals

Mailing Address Sherwood Forest Blvd

City State ZIP Code
Baton Rouge LA 70816

Outstanding Balance Beginning This Period

54.33

Transaction ID: D90FB67465A6E4FB4B29

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Will Vanderbrook CpaNature of Debt (Purpose):
Accounting ServicesMailing Address 2900 Clearview Pkwy
Suite 206City State ZIP Code
Metairie LA 70006-6532

Outstanding Balance Beginning This Period

14615.00

Transaction ID: D059CF35BF30349B082E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14615.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Windrush GrillNature of Debt (Purpose):
Travel

Mailing Address 1023 Provence PL

City State ZIP Code
Shreveport LA 71106

Outstanding Balance Beginning This Period

135.66

Transaction ID: DBB65513DD1E348408C2

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.66

1) SUBTOTALS This Period This Page (optional).....

14804.99

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 36 / 44

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Winn Dixie StoreNature of Debt (Purpose):
Meals snacks

Mailing Address Coursey Blvd

City State ZIP Code
Baton Rouge LA 70816

Outstanding Balance Beginning This Period

95.75

Transaction ID: DD0F5C31C33264CB1933

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

95.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wyndham HotelsNature of Debt (Purpose):
Travel

Mailing Address 1910 8th Ave NE

City State ZIP Code
Aberdeen SD 57401

Outstanding Balance Beginning This Period

94.08

Transaction ID: DD55A875E37834238880

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

94.08

1) **SUBTOTALS** This Period This Page (optional).....

189.83

2) **TOTALS** This Period (last page this line number only).....

52920.21

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

52920.21

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- X Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 38 / 44
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

NAME OF ACCOUNT
 RPL-Federal

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

7263.93

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7263.93

Transaction ID: H1598FC78B7A44BC68B7

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

7263.93

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

7263.93

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 39 / 44
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)

Pat Bergeron

Mailing Address

6344 Peggy St

City

State

Zip Code

Baton Rouge

LA

70808-4253

Purpose of Disbursement:

Email Consulting

Category/
Type

Activity or Event Identifier:

Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58922.33

Date 07 / 06 / 2010

Transaction ID: H11EBCA4A51B64E83A4D

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

630.00

2370.00

3000.00

B. Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address

1295 Charleston Road

City

State

Zip Code

Mountainview

CA

94043

Purpose of Disbursement:

Merchant Fees

Category/
Type

Activity or Event Identifier:

Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58922.33

Date 07 / 06 / 2010

Transaction ID: H1CA30E14A7A441DAA69

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.64

51.31

64.95

C. Full Name (Last, First, Middle Initial)

Iberia Bank

Mailing Address

3700 Essen Ln

City

State

Zip Code

Baton Rouge

LA

70809-2134

Purpose of Disbursement:

Bank Serv Fees

Category/
Type

Activity or Event Identifier:

Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

59194.56

Date 07 / 12 / 2010

Transaction ID: H54F6CF22444045B2B61

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

57.17

215.06

272.23

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

700.81

2636.37

3337.18

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 40 / 44

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
 Charles Robert Carter Properties

Mailing Address

1565 Choctaw Dr

City	State	Zip Code
Baton Rouge	LA	70805

Purpose of Disbursement:
 Office Rent

Category/
Type

Activity or Event Identifier:
 Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

61381.52

Date

M	M
0	7

 /

D	D
2	0

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H991C3C4620454317ACC

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

459.26

1727.70

2186.96

B. Full Name (Last, First, Middle Initial)
 Marriott Hotel

Mailing Address

10400 Fernwood Rd

City	State	Zip Code
Bethesda	MD	20817

Purpose of Disbursement:
 Travel

Category/
Type

Activity or Event Identifier:
 Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63071.02

Date

M	M
0	7

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: HCC8BE9D634624E72B87

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

196.19

738.06

934.25

C. Full Name (Last, First, Middle Initial)
 Lwcc

Mailing Address

P. O. Box 260237

City	State	Zip Code
Baton Rouge	LA	70826-0237

Purpose of Disbursement:
 Workers Comp Ins

Category/
Type

Activity or Event Identifier:
 Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63071.02

Date

M	M
0	7

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H4FE6C76D2BBD4E7A8F9

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

35.07

131.93

167.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

690.52

2597.69

3288.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
Gaylord National

Mailing Address

201 Waterfront

City

State

Zip Code

Oxon Hill

MD

20745-1135

Purpose of Disbursement:
TravelCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63071.02

Date M M / D D / Y Y Y Y

07 / 22 / 2010

Transaction ID: H5FA59174859D48EB913

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

123.53

464.72

588.25

B. Full Name (Last, First, Middle Initial)
At&t

Mailing Address

PO Box 945800

City

State

Zip Code

Maitland

FL

32794-5800

Purpose of Disbursement:
Phone ExpenseCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63579.38

Date M M / D D / Y Y Y Y

07 / 23 / 2010

Transaction ID: H4921DBB89FC0446E930

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

106.76

401.60

508.36

C. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address

Bluebonnet Blvd

City

State

Zip Code

Baton Rouge

LA

70809

Purpose of Disbursement:
PostageCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

64986.24

Date M M / D D / Y Y Y Y

07 / 27 / 2010

Transaction ID: H5D3598B4AA4C4DC3925

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.72

104.28

132.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

258.01

970.60

1228.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 42 / 44

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
 Villere's Florist

Mailing Address

750 Martin Behrman

City State Zip Code

Metairie LA 70005

Purpose of Disbursement:
Flowers BenevolenceCategory/
TypeActivity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

64986.24

Date

M	M
0	7

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: H8D14A2C163294073920

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

28.10

105.69

133.79

B. Full Name (Last, First, Middle Initial)
 Sterling Computer Products

Mailing Address

16135 Covello St

City State Zip Code

Van Nuys CA 91406-2911

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

64986.24

Date

M	M
0	7

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: HEA4C3FF690C64395AA1

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.46

125.87

159.33

C. Full Name (Last, First, Middle Initial)
 Verizon Wireless

Mailing Address

PO Box 2167

City State Zip Code

Folsom CA 95763

Purpose of Disbursement:
Cellphone ExpenseCategory/
TypeActivity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

64986.24

Date

M	M
0	7

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: HA86309C8903A439680F

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

56.36

212.00

268.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

117.92

443.56

561.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 43 / 44
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)

Myra S Myers Prp

Mailing Address

7344 Meadowview Ave

City

State

Zip Code

Baton Rouge

LA

70810-2023

Purpose of Disbursement:
Professional ServsCategory/
TypeActivity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

64986.24

Date 07 / 27 / 2010

Transaction ID: H065F870024DB4000B34

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.00		237.00		300.00

B. Full Name (Last, First, Middle Initial)

Direct Tv

Mailing Address

PO Box 60036

City

State

Zip Code

Los Angeles

CA

90060-0036

Purpose of Disbursement:
TVCategory/
TypeActivity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

64986.24

Date 07 / 27 / 2010

Transaction ID: H9CD41730340840AE9C9

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.89		67.30		85.19

C. Full Name (Last, First, Middle Initial)

De Lage Landen Financial Svcs

Mailing Address

P. O. Box 41601

City

State

Zip Code

Philadelphia

PA

19101-1601

Purpose of Disbursement:
Computer LeaseCategory/
TypeActivity or Event Identifier:
Admin

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

64986.24

Date 07 / 27 / 2010

Transaction ID: H92B69422DFCC416DBF7

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.92		259.27		328.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
149.81		563.57		713.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 44 / 44
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
Office Depot Credit Plan

Mailing Address

P. O. Box 9020

City

State

Zip Code

Des Moines

IA

50368-9020

Purpose of Disbursement:
Supplies

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

65052.24

Activity or Event Identifier:
Admin

Date M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 0

Transaction ID: H759D111F47314FFBB26

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

13.86

52.14

66.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

13.86

52.14

66.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

1930.93

7263.93

9194.86